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72960 7590 017 Casimir Jones, S.C. 440 Science Drive Suite 203 Madison, WI 53711		Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
wadison, wi 55/11					(Depositor's name)
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					(Date)
APPLICATION NO. FILING DAT	Е	FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/729,156 12/05/2003 TITLE OF INVENTION: SMALL MOLECULI		Shaomeng Wang L-2 FAMILY PROTEINS		UM-08477	1029
APPLN, TYPE SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEE TOTAL FEE(S) DUI	E DATE DUE
nonprovisional YES	- 872 0 1440	\$300	\$0	\$1020-	04/28/2008
EXAMINER	ART UNIT	CLASS-SUBCLASS		1740	
HUI, SAN MING R 1. Change of correspondence address or indication	1617	514-682000			
CFR 1.363). Change of correspondence address (or Ch Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Addres PTO/SB/47; Rev 03-02 or more recent) attac Number is required. ASSIGNEE NAME AND RESIDENCE DAT PLEASE NOTE: Unless an assignee is iden recordation as set forth in 37 CFR 3.11. Com	or agents OR, alternativ (2) the name of a single registered attorney or a 2 registered patent attor listed, no name will be possible PATENT (print or type)	(1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. E PATENT (print or type) ta will appear on the patent. If an assignee is identified below, the document has been filed for a substitute for filing an assignment.			
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) The Regents of the University of Michigan Ann Arbor, Michigan					
Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🗹 Corporation or other private group entity 🗀 Government					
4a. The following fee(s) are submitted: Issue Fee Publication Fee (No small entity discount permitted) Advance Order - # of Copies		4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 50-4302 (enclose an extra copy of this form).			
5. Change in Entity Status (from status indicate a. Applicant claims SMALL ENTITY stat	✓ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).				
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